Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on 3-26-04. CPT Code 76856 for date of service 5-7-03 was withdrawn on a fax from the requester on 5-3-04.

I. DISPUTE

Whether there should be reimbursement for Special Reports, Short Latency, H-reflex Amplitude and Latency, Nerve Conduction, Myofascial Release, Joint Mobilization, and Therapeutic Procedures from 4-15-03 through 5-14-03.

II. RATIONALE

- Regarding CPT Code 99080-61 for date of service 4-15-03: This is no longer a required report. **Recommend no reimbursement.**
- Regarding CPT Code 95927 for date of service 5-7-03: This is not a valid CPT code under 1996 Fee Guidelines. **Recommend no reimbursement.**
- Regarding CPT Code 95934 for date of service 5-7-03: This is not a valid CPT code under 1996 Fee Guidelines. **Recommend no reimbursement.**
- Regarding CPT Code 95904 for date of service 5-7-03: This service was denied with an "N" Not Documented. The requester did not furnish additional information regarding this service. **Recommend no reimbursement.**
- Regarding CPT Code 97150 for date of service 5-9-03: the 1996 MFG Medicine Ground Rule (I)(A)(10)(a) states, "The maximum amount of time allowed per session is two hours. If additional time is required to complete the treatment rendered in a session, a maximum of one additional hour may be allowed. One session per day is allowed." 2 hours of Therapeutic Procedures (CPT Code 97110) were charged on this date. Per documentation from the insurance carrier a payment for physical medicine sessions in the amount of \$976 was rendered for dates of service 5-7-04 through 5-14-03. DOP is required for time exceeding the two hour maximum.) There was no additional documentation sent by the requester. **Recommend no reimbursement.**
- Regarding CPT Code 97250 for dates of service 5-9-03, 5-12-03 and 5-14-03: TWCC Medicine Ground Rules for Physical Medicine state, "The maximum amount of time allowed per session is two hours. If additional time is required to complete the treatment rendered in a session, a maximum of one additional hour may be allowed. One session per day is allowed. 2 hours of Therapeutic Procedures (CPT Code 97110) were charged on this date.) **Recommend no reimbursement.**
- Regarding CPT Code 97265 for dates of service 5-9-03, 5-12-03 and 5-14-03: TWCC Medicine Ground Rules for Physical Medicine state, "The maximum amount of time allowed per session is two hours. If additional time is required to complete the treatment rendered in a session, a maximum of one additional hour may be allowed. One session per day is allowed. **Recommend no reimbursement.**

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• Regarding CPT Code 97150 for date of service 5-14-03: TWCC Medicine Ground Rules for Physical Medicine state, "The maximum amount of time allowed per session is two hours. If additional time is required to complete the treatment rendered in a session, a maximum of one additional hour may be allowed. One session per day is allowed. **Recommend no reimbursement.**

IV. DECISION

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor **is not** entitled to reimbursement for dates of service 4-15-03 through 5-14-03.

The above Findings and Decision are hereby issued this 20th day of October, 2004.

Medical Dispute Resolution Officer Medical Review Division